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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/EP2005/000215 01/12/2005

**** FOREIGN APPLICATIONS *******

GERMANY 10 2004 002 001.9 01/14/2004

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		GERMANY	0	21	4

ADDRESS

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TITLE

Composition for Treating Inflammatory Diseases

FILING FEE RECEIVED 575	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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